

An  
Inaugural  
Dissertation  
on  
The Cause

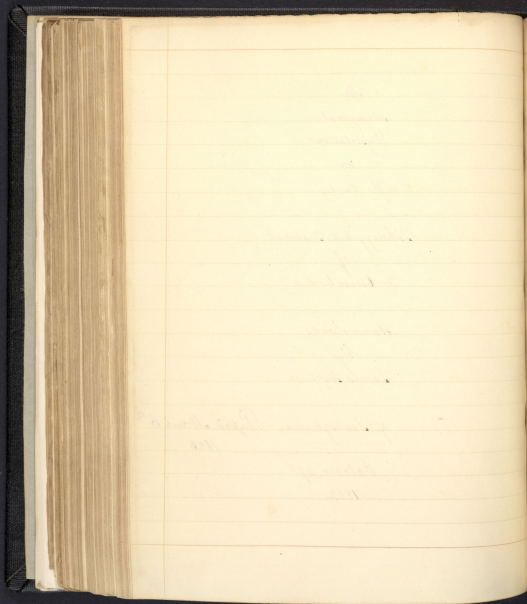
Pathology and Treatment  
of  
The Disease termed

Hæmorrhoids  
by  
James Hepburn

of Pennsylvania

Filed March 6<sup>th</sup>  
1828

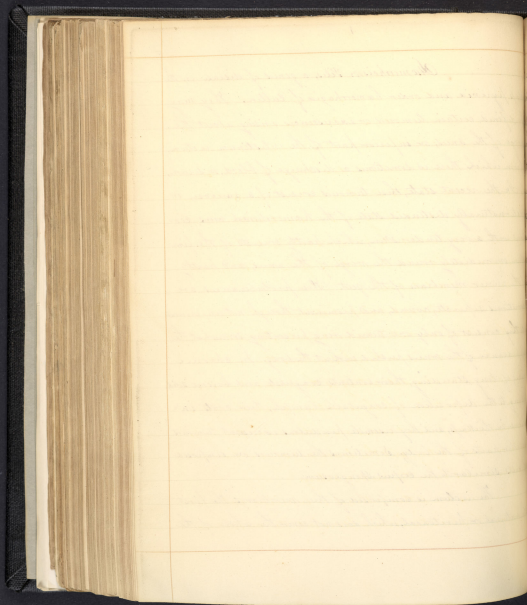
October 27<sup>th</sup>  
1822.



*Hæmorrhoids* or *Piles*, a genus of disease in the class pyrexia and order hæmorrhagia of Cullen. They may be defined certain tumours, or excrescences arising about the verge of the anus, or inferior part of the intestinum rectum, from which there is sometimes a discharge of blood, or serum.

In the recent state, these tumours consist of a varicose, or preternaturally distended state of the hæmorrhoidal veins, covered with a very tender skin, which partly consists of the fine skin immediately round the verge of the anus, and partly of the inner membrane of the gut. These protuberances are sometimes separate, round, and prominent, though not unfrequently they consist of only one tumid ring, presenting, somewhat, the appearance of the anus pushed without the body. In chronic cases of long standing, their contents coagulate and become solid, owing to the deposition of coagulable lymph, their coats increase in thickness, and they resemble pendulous excrescent tumours in other parts of the body. Sometimes the tumours are composed of cells similar to the *corpus spongiosum*.

The rectum is composed of three membranes, the first the external or peritoneal, which does not cover the whole of the



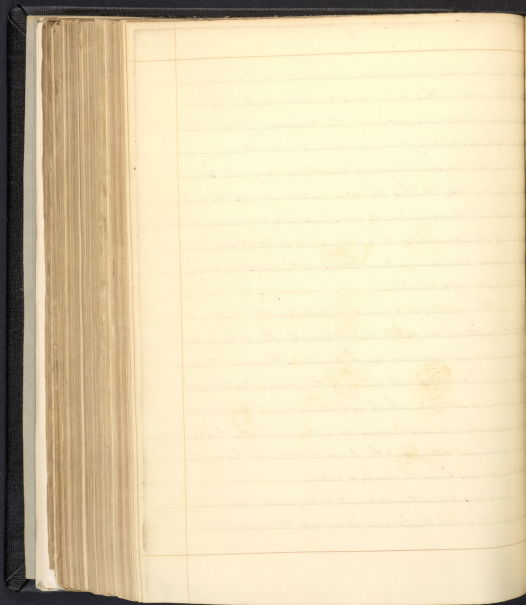


section, the middle, or muscular, and the internal lining or mucous membrane. These membranes are connected to each other by intervening cellular substance. The muscular fibres of this intestine always tend by their contraction to lessen its cavity, and the internal membrane being very lax, forms itself into numerous rings, or folds. In this structure nature respects the use of the part, which occasionally gives passage to, or allows the retention of the excrements; the hardness and bulk of which might produce considerable lacerations of the intestine, were it not capable of dilatation.

The arteries, and veins, distributed to the inferior part of the rectum, are called haemorrhoidal. The arteries are generally two in number, though sometimes there are three.

The upper haemorrhoidal artery is the principal branch of the lower mesenteric, which is continued into the pelvis; the middle when present comes off either from the hypogastric, or pudic artery, and the lower or external haemorrhoidal artery arises from the pudic artery.

The veins are either internal or superior, external or inferior. Of which the former flows into the mesenteric



branch, and afterwards into the vena porta; the latter empties into the internal iliac. All the blood vessels of this part, however, are very frequently connected with each other by anastomoses.

The protuberances constituting Hemorrhoids, have according to their situation &c. received various appellations by authors. Thus when situated at the verge of the anus, and protruding outwards, they are called External, but when above the sphincter ani and within the rectum, Internal Piles.

When they are accompanied by a discharge of blood, which happens most commonly upon the patient's going to stool, the disease is then known by the name of Bleeding Piles; but when unattended by any discharge it is called Hemorrhoides Coecæ, or Blind Piles. It is also termed Hemorrhoides Albæ, or White Piles, when accompanied by a discharge of serum; which is sometimes very acrid and exceedingly painful to the patient.

**Etiology.** From the peculiar situation and structure of the rectum, it is obvious that the veins distributed upon it are much more liable to become varicose, than those of any other part of the body. In consequence of the rectum being a depen-

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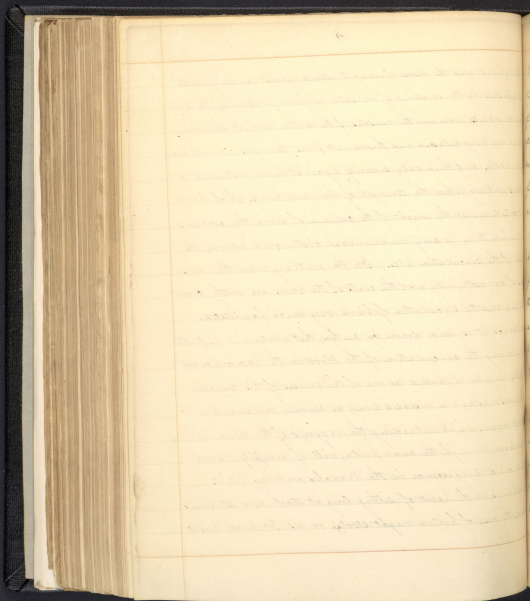
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seat part, and the blood having to ascend against its own gravity is assisted by the swelling of muscles, or from pressure of the surrounding parts. When even the muscles of the rectum contract, the lining membrane being relaxed and thrown into folds, the veins are left loose and fleshy, and their only security against being distended, depends entirely upon the strength of their own coats, which have not only to resist the weight of the column of blood they contain, but when there is any mechanical obstruction above, the force of the circulation also. On the contrary, when the muscles of an extremity act, the coats of the veins are gently compressed, and the circulation of blood very much facilitated.

Hence it is laid down by authors, that whatever is capable of retarding the circulation of the blood in the haemorrhoidal vessels, may be regarded as one of the causes of this disease.

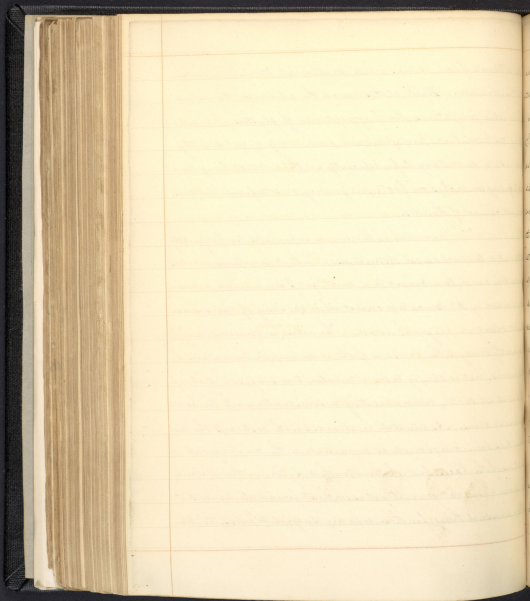
Persons who have a diseased liver, as chronic inflammation &c. of that organ, which retarding the progress of the blood in its passage through the vena porta, will of necessity have produced a turgescence in the branches emptying into it.

Costiveness, or the habit of sitting long at stool and straining hard, the use of hollow night-stools, or as Dr. Keen has it,



The effluvia from pruritis while seated at stool, are causes of this disease. Tight clothes round the abdomen; the abuse of drastic purgatives; too frequent use of glysters; hard riding on horse-back; prolapus ani, particularly if not speedily reduced; a sedentary life, especially in the robust; long and fatiguing marches on foot; pregnancy, and difficult labours, are all causes of the piles.

The production of this disease is perhaps too frequently attributed to mechanical obstructions. That it sometimes proceeds from this cause, there cannot be a doubt, yet, I am disposed to believe the remark of Dr. Burns to be correct, when speaking of this disease as it occurs in pregnant women. The piles, he observes, may be partly owing to the pressure of the womb upon the vessels of the pelvis, but is chiefly to be attributed, to a sluggish state of the intestinal canal, communicating a similar topor to the hæmorrhoidal veins. As this state is attended with costiveness the disease has been considered as dependent on the mechanical action of the faeces, but whatever truth may be in this opinion in some cases, yet generally it is without foundation; and it is no unusual thing for those, who are subject to piles, to be

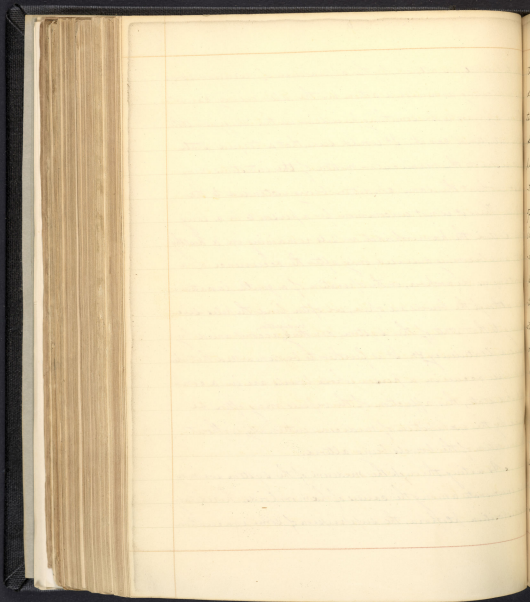




able to protect an attack, by the appearance of peculiar symptoms indicating diminished action in the alimentary canal.

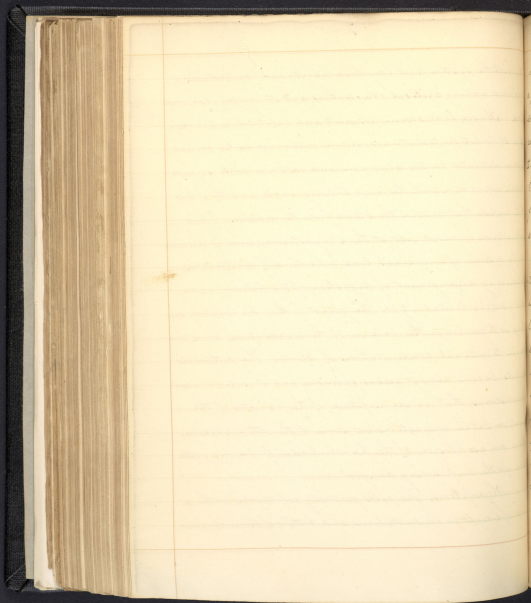
There appears to be something peculiar in this sluggish state of the intestinal canal. It would seem, that a torpid state as it respects the vermicular motion of the intestines, may exist, without the same condition being extended to the vessels. Thus it is not uncommon for a person to be a long time costive, the hemorrhoidal vessels remaining in a healthy state, and becoming diseased only after the occurrence of a spontaneous diarrhoea, or the operation of a gentle laxative: and although the bowels are open, we often find the piles succeding to that state of the system, denoting <sup>irritation</sup>, accompanied by nausea flatulency &c. It is further to be remarked that, when the disease occurs in a person whose bowels are in a constipated state, this affection of the vessels may often be cured by the exhibition of medicine internally, without the condition of the bowels being altered.

As acting through the medium of the system we may also enumerate among the causes of hemorrhoids; hereditary predisposition, plethora, the suppression of some evacuation



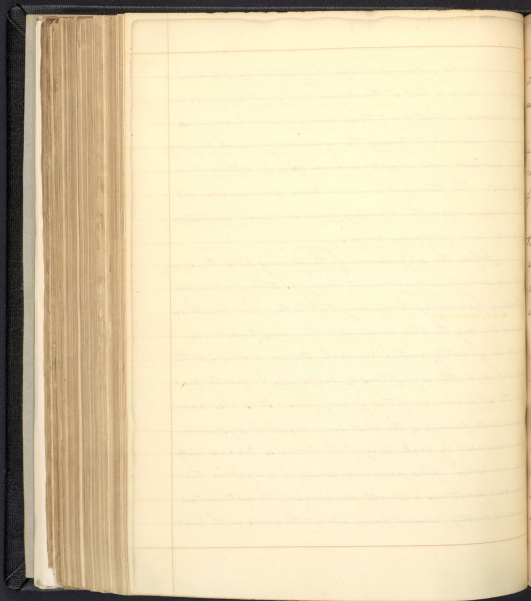
to which the system had long been habituated; metastasis of diseased action, critical evacuations, and strong mental emotions. Sorrow, fear, ennui, disgust, and habitual melancholy, says Dr Monteggia, exert a remarkable influence on the coeliac plexus situated in the abdomen, and in immediate sympathy with the liver, biliary ducts, and the whole of the vessels that return the blood from the rectum. This impression is most felt at the epigastrium, and is displayed by a sense of uneasiness, load, and kind of constriction, producing derangement of digestion, of the biliary secretion, gastric irritability &c. The effect of these melancholy emotions is to unbalance the balance of the circulation, and give origin to internal concentrations of blood. The cutaneous vessels become almost esanguinous, and it is under such circumstances, that we see rupture of the parietes of the heart, or fatal congestions in some of the other viscera. Here an explosion of the hemorrhoidal flux, may often ward off the impending danger.

Symptoms. The piles generally commence with a sense of weight in the back, loins, and bottom of the belly, pain



in the head and giddings. When the patient goes to stool, a pungent pain is felt at the anus, and small tumours are soon discovered in that part; these tumours soon become exceedingly painful, torturing the person very much on going to stool, who also feels an inconvenience even in sitting on a hard seat. The tumours are sometimes considerable, and from pressure upon the bladder, produce much irritation and even pain in voiding urine.

Before the appearance of the flowing piles, the symptoms are sometimes very violent, being as strongly marked as those of hæmorrhage from any other part. The mouth and fæces are dry, the skin constricted, the urine pale, and small in quantity, vertigo, headache, stupor, sickness at the stomach, and other symptoms of dyspepsia, frequently precede the appearance of this form of piles. It is also accompanied with fulness of the chest, some degree of dyspnoea, often increased by flatulency of the bowels. Occasionally there are colic pains, pain, or a sense of weight in the loins, and sometimes a slight numbness of the extremities. There is mostly present pain about the anus with heat

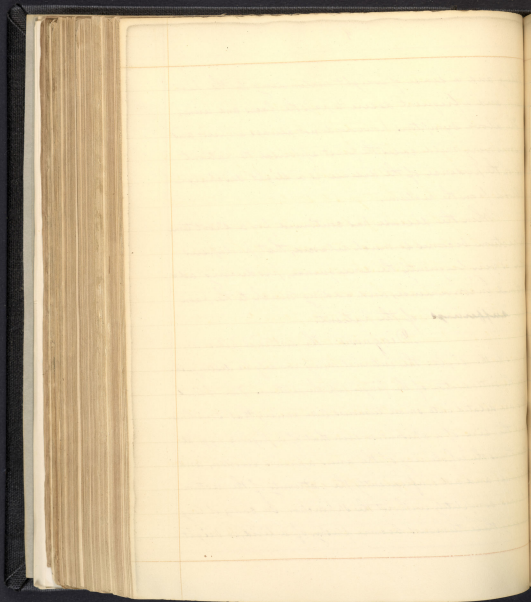


itching, and a sense of weight extending to the perineum, and a frequent desire to pass the feces and urine.

The above symptoms, however, do not always appear, and in some very mild cases the first appraisal the patient has of the presence of the disease is, a slight discharge of blood from the rectum.

When the disease has continued for a short time, the rectum becomes so much relaxed, that, prolapsus ani is very frequently the consequence, producing additional inconvenience, and adding much to the pain and sufferings of the patient.

Diagnosis: The external piles are obvious to the sight; the internal may readily be distinguished by the introduction of the finger up the rectum. The blind piles are dilated into small tumours like varices, that sometimes equal the size of a walnut, or even that of a pigeon's egg; at other times the whole ring of the anus appears swollen, and unequal: and not unfrequently the extremity of the rectum is turned completely without the sphincter. In cases of long standing, these tumours become fleshy, of a livid, or bright



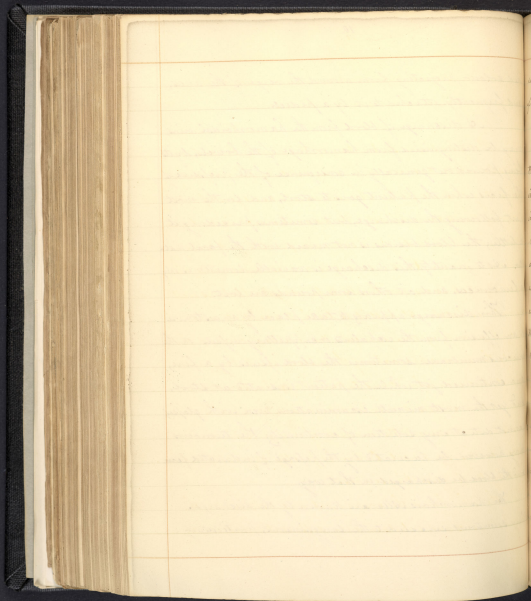


red colour, projecting from around the verge of the anus, and frequently attached to it by a pedicle.

A discharge of blood from the haemorrhoidal veins, may be distinguished from haemorrhage of the bowels, by its being poured out generally in consequence of the pressure of the feces, when the patient goes to stool, and, for the most part, following the discharge, but sometimes preceding it a little; the blood besides is not mixed with the faecal matter. As to quantity, this discharge is variable, sometimes only a few ounces, and at others some pounds are lost.

This discharge appears to take place by an anastomosis or an effusion from the coeliac or mesenteric vessels on the mucous membrane; sometimes the blood issues by a fine, and continued jet, while the patient is seated at stool, and yet the most minute examinations, even with glasses, cannot detect any solution of continuity; the tumours may, however, be lacerated by the passage of indurated feces and the blood be discharged in that way.

The haemorrhoids are known by the discharge. They sometimes succeed to the sanguineous, particularly

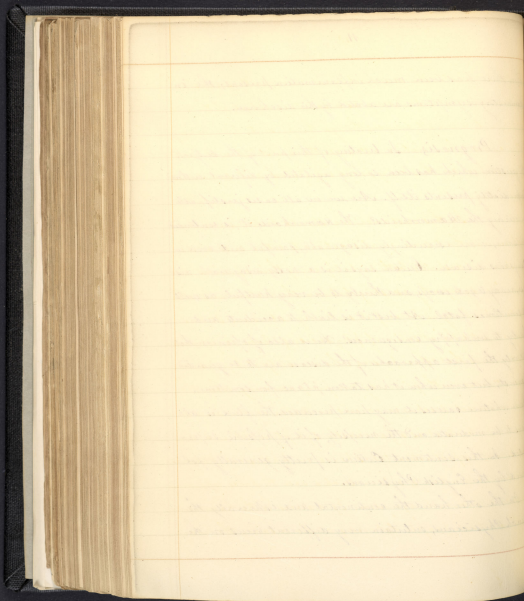


when there has been much inflammation present; the inflammatory symptoms are abated by his discharge.

*Prognosis.* In treating of this part of the subject, the question which has been so long agitated by different authors, immediately presents itself. Are we in all cases justifiable in curing the Hemorrhoids? The Hemorrhoids, it is contended by some, is an exceedingly disagreeable, painful and even a dangerous disease. Cullen says it is a 'most disagreeable disease, ready to get worse, and thereby to be very hurtful, as well as sometimes fatal. At best it is liable to accidents and thereby to unhappy consequences! He is also of opinion, that not only the first approaches of the disease are to be guarded against, but even when it has taken place for sometime.

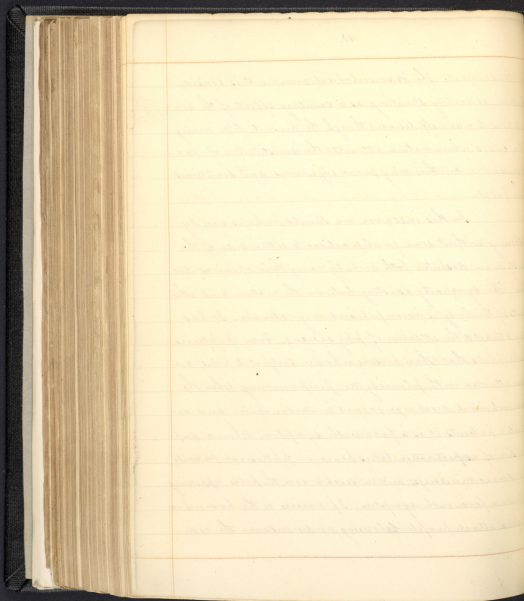
From whatever causes it may have proceeded, the flux is always to be moderate and the necessity of it if possible superadded. In this sentiment Cullen is pretty generally followed by the English Physicians.

On the other hand the continental and especially the French Physicians, entertain very different views on the



on the subject. The hæmorrhoidal movement is considered by them generally speaking as a salutary effort of the constitution, to ward off disease; though the present, like many other cases where nature attempts the substitution of one disease for another, may prove injurious and sometimes even fatal.

In this instance we should perhaps err, by adhering without some qualifications to either side of the question in dispute; both probably carry their opinions too far. The sympathy existing between the rectum and other parts of the body is powerful and very extensive. It has long attracted the attention of physicians. Even Hippocrates remarks that those persons who are subject to piles, are never attacked with pleurisy nor peripneumony. When the hæmorrhoidal discharge occurs in Melancholic and nephritic patients it is a favourable symptom. When a suppression of expectation takes place in phthical patients it induces madness; and in such a case the piles appearing affords a favourable symptom. If varices or the hæmorrhoidal flux attack people labouring under insania the com-

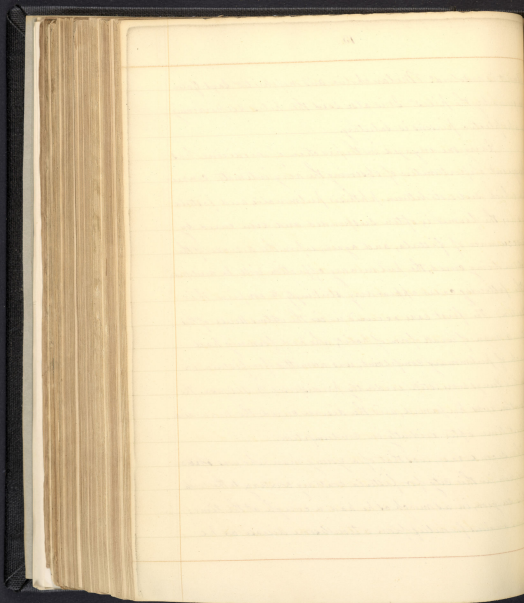


plaint is resolved. Melancholia and nephritis says Galen are cured by the piles. It is also said the piles supervening in a plethoric persons is salutary.

Every one engaged in the practice of medicine has frequent opportunities of observing the very intimate connection which subsists between phthisis pulmonalis and fistula in ano; the former is often suspended and even cured by the occurrence of fistula, and again, upon the disease of the rectum being cured, the pulmonary affection will be developed.

The following cases appear very strikingly to confirm this assertion. The first case occurred in ~~in~~ the Almshouse of this city—a man of weak form of habit, who had formerly had much of pulmonary complaint, was admitted for fistula in ano; his lungs were still evidently predisposed to disease. The operation was performed, and the disease cured; the man died a short time after evidently in consumption.

The second case, was that of a young man who was admitted upon in this City for fistula contrary ~~contrary~~ to the wish of his surgeon, in as much as he had a cough at the times; he was anxious for relief from a troublesome disease as he



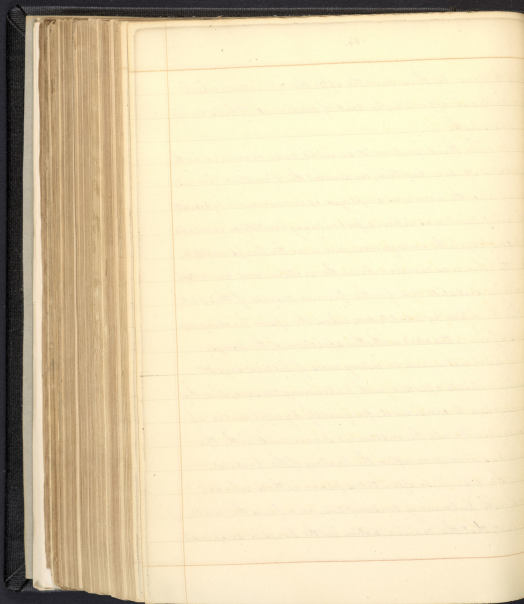


wished to travel. In three months after the operation, which cured the local affection, he died of confirmed Phtisis, on his way to the South.

The third and most curious case occurred in the Hospital - A sea Captain underwent the operation for fistula in ano, the wire was employed as recommended by Desault, as the complaint was relieved, pulmonary irritation increased, and hæmoptysis the consequence; nor were the lungs galled, until the wire was removed from the rectum, and an artificial drain substituted for the former disease of this part. In this condition he went to sea, when the issue healing up, he was again attacked with the affection of the lungs.

I have witnessed so many cases of fistula, says Dr Evers, in patients affected with pulmonary consumption, that I am disposed to consider it, frequently, symptomatic of that disease. In all the instances I have met with, the patient has died soon after the healing of the fistula.

Since this disease so often takes place in those who are affected with pulmonary consumption, and from the well known fact, that the morbid action in the lungs is suspended

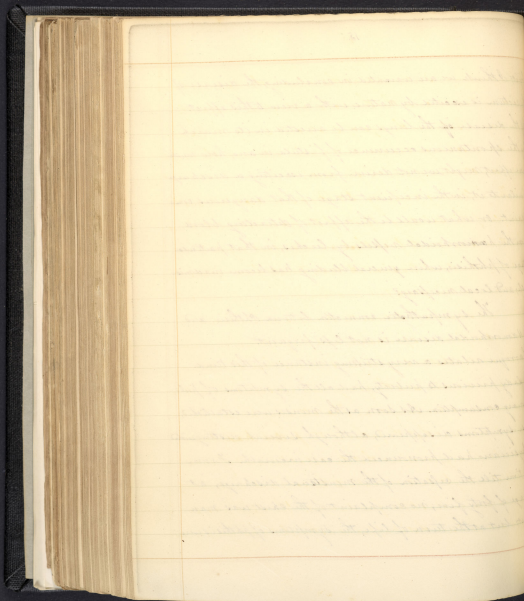


by it. I think we are warranted in concluding the disease of the rectum is excited by nature with a view to this effect.

If the disease of the lungs can be arrested in its march by the spontaneous occurrence of fistula in ano, how much more effect might we not derive from exciting a discharge similar to it, in the incipient stage of that dangerous complaint. or what would be the effect of detaching blood from the hemorrhoidal vessels by leeches, in that particular stage of phthisis, when general bleeding has become inadmissable, and local necessary?

The sympathetic connection between Phthisis and the Hemorrhoidal disease is not less frequent.

Larroque relates a very striking instance of this kind. A lady previous to puberty, had all the symptoms of pulmonary consumption. As soon as the menses were established, these symptoms disappeared, although several distinguished physicians had pronounced the case incurable. From this time till the cessation of the menstrual discharge, at the age of forty five, no complaint of the chest was manifest, but at the turn of life, the symptoms of phthisis were



again renewed. Unfortunately at this epoch the haemorrhoidal flux appeared, and the thoracic affection instantly gave way. Between the age of sixty, and seventy, the haemorrhoidal discharge ceased, and again returned the cough and expectoration, of which she died.

The following case by Dr. Bodson exhibits another example of the salutary effects of the haemorrhoidal flux, when there is reason to fear that an important organ is on the eve of structural tension. A man twenty five years of age, married two years, tall and thin, became afflicted with constant and severe pain between the shoulders, accompanied by cough, and copious expectoration, and progressively increasing debility, notwithstanding various means these symptoms got worse and worse, and the young man was considered to be in a confirmed consumption. The attending physician happening to recollect that the father of the patient had been haemorrhoidary, conceived that the establishment of such an affection, might be serviceable to the son; and consequently applied six leeches to the fundament. The effect was so rapid and decisive, that it appeared as though the pulmonary dis-

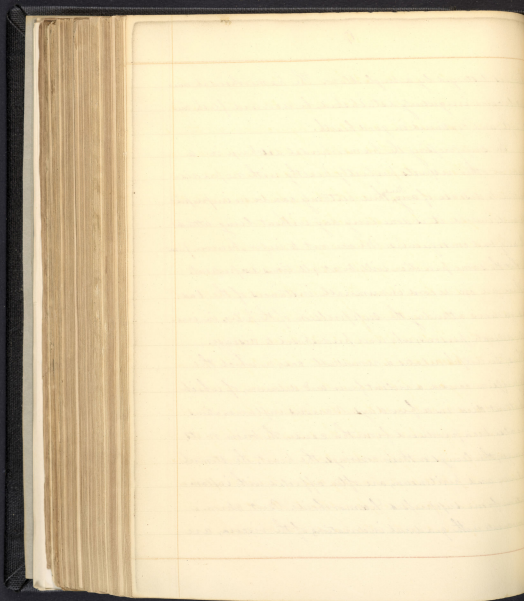


case was destroyed by a single blow. The hamorrhoidal mass  
did not become irregularly established, he recovered flesh and  
strength, and continued in good health.

In suppressing the hamorrhoidal discharge in a  
person, in other respects perfectly healthy with no pre-  
disposition to disease of any <sup>kind</sup>, there certainly can be no improprie-  
ty; and, indeed, it is done every day without being attended  
with any bad consequences. We are not to infer, however, from  
this, that the same practice will be at all times so prudent.

There are on record innumerable instances of the bad  
consequences attending the suppression of the piles, in irri-  
tably delicate persons, who were predisposed to disease.

Thus, Luddolph relates a remarkable case in which the  
suppression caused a violent fever and delirium, of which  
the patient died in a few days. Various inflammations  
have also been produced from this cause, the brain or its  
meninges, the lungs or their coverings, the heart, the stomach,  
the liver, and peritoneum, are often affected with inflam-  
mation from suppressed hamorrhoids. But chronic  
engorgements with gradual indurations of the viscera, are



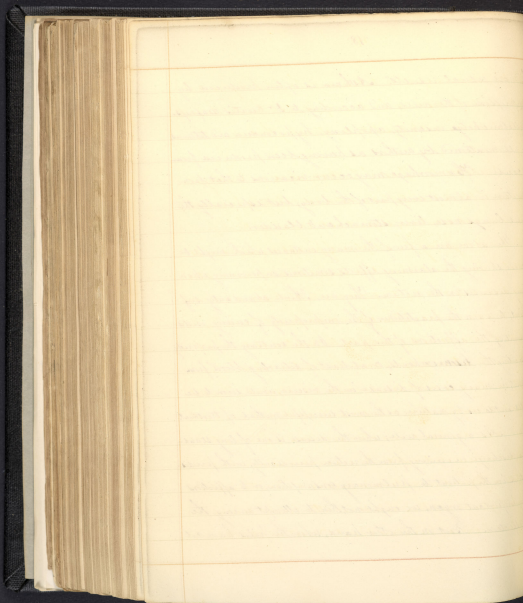


the more usual results. Asthma is often produced by suppression of the piles, and according to Dr Curtis dropsy.

Melancholia, insanity, apoplexy, hypochondria and tetanus, are all mentioned by authors as having been produced from this cause. Hemorrhage may occur vicariously to that from the rectum in almost every part of the body, but especially the uterus, lungs, nose, liver, stomach and bladder.

The above are a few of the many instances which might be adduced, showing the alarming effects, sometimes supervening upon curing diseases in the rectum. They are, I think abundantly sufficient, to warn the practitioner of the impropriety of curing indiscriminately the affections of this part. On the contrary the propriety of exciting the hemorrhoids, or at least of extracting blood from this part, in many cases of disease in the viscera, would seem to be pointed out to us by nature, as the most successful method of treatment.

As a general rule, when the disease is one of long standing, a discharge occurring from the rectum periodically, with predisposition in the patient to pulmonary consumption, or to affection of any important organ, we ought not then, to attempt curing the anal affection. But on the other hand, when the piles have not



existed long, no predisposition to disease in the vital organs, and especially should the discharge be so profuse, as to threaten the health of the patient, we are not to hesitate in attempting the cure.

*Treatment.* First of the Haemorrhoids, or Bleeding Piles.

The discharge of blood from the haemorrhoidal vessels is frequently very profuse, and sometimes so great as to endanger the life of the patient, and requiring the adoption of prompt measures in its treatment. The patient should be placed in a cool, airy situation, on a firm bed and lightly covered with clothes, in a horizontal posture; and on his face if he can remain so, with the foot of the bed a little elevated, so as to favour by the position as much as practicable the return of blood from the bleeding vessels.

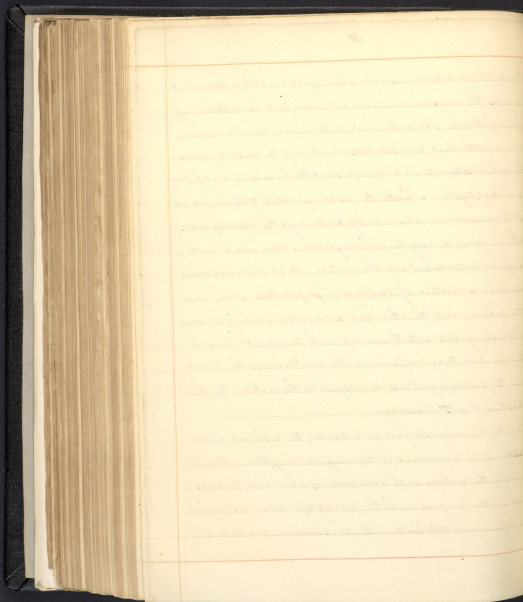
Perfect quietness is most scrupulously to be observed. This state is generally accompanied by a pulse full, quick, and hard, with a flushed face, dry tongue, and other symptoms of febrile action.

The lancet is here indicated. The evacuation should be continued till a decided impression is produced upon the system, and unless they employed there will be but little benefit derived from it. Cold local applications should, next resorted to.



Ice applied to the anus, cold water injected up the rectum, and, in females, the vaginal also, will act powerfully in restraining the flow of blood. As acting upon the principle of revulsion, cupping on the back and shoulders, frictions to the chest, ligatures on the upper extremities, or a sinapism to the inside of each arm, may be employed. Should the discharge still continue, we are next to endeavour mechanically to compress the bleeding vessels. For this purpose a very large bougie has been used with good effect, introduced up the rectum. Or it is recommended to introduce a portion of sheep's, or pig's gut, tied at one end, into the rectum; into the other end cold water, or vinegar and water, is to be injected and thrown up with sufficient force to make firm and strong pressure on the part whence the blood issues: the distended gut is to be retained in the rectum by the application of a T bandage.

When the bleeding surface is situated too high up within the rectum to be compressed in this way, we may then attempt it by filling the rectum with cold water, or what will perhaps answer a better purpose, with the addition of some astringent, as an infusion of oak bark, or the persimmon, or a solution



of stium, sulphate of zinc, or the acetate of lead. The bowels are to be kept gently opened by some of the mild laxatives.

These measures with the use of cold acidulated drinks, as lemonade, cream of tartar and water, toast and water, or the vegetable acids, will in general be found sufficient to arrest the hæmorrhage.

*Hæmorrhoides Cocæ*; this is the most common form of piles and is exceedingly troublesome and vexatious to the patient. The pain arising from it in some instances, is so very severe, as to be equalled but by fear of the diseases to which it is so obnoxious; and in its treatment, the Physician is often much perplexed, and not unfrequently entirely foiled in his expectations. The Blind Piles when inflamed are accompanied with tumefaction, heat, throbbing, a frequent desire to stool, with straining &c. If the pulse is excited, it will be necessary to bleed from the arm, and if required the operation may be performed.

The bowels are to be opened by the administration of some mild laxative, as the sulphate of Magnesia, sulphate of soda, or castor oil, in small doses. Rest in the horizontal position is of great importance, and should always be enjoined upon the patient.

Leeches and scarifications are frequently resorted to in





In cases, they are, however, objected to by some, who say that depletion from the tumours themselves produces too much irritation: and, it is asserted that instead of unloading the distended vessels the effect is quite contrary, the determination of blood to the part being augmented considerably, together with all the consequences of that determination. To obviate this effect it is advised that the leeches be applied to the loins, where they will have the effect of disengorging locally without producing irritation by their bites.

As co-operating with the above remedies we may employ with advantage cold applications to the part. What answers very well tents of lint dipped in a solution of Saccharum Saturni, with the addition of a little Laudanum, or a cold bread and milk paste moistened with the above solution; or the injection of cold water up the rectum.

Inflammation being somewhat reduced, we may then resort to some of the following articles with the view of allaying pain and irritation. Given with this intention, Doctor Chapman thinks he has derived more benefit from the following ointment, than any other prescription which he had used.

R. Fresh Sperm ʒij Spermaceti ʒij Laudanum ʒij Oen-

The first of these is the fact that the  
 human mind is not a blank slate at birth.  
 It is a tabula rasa, but it is not a  
 completely empty one. It is filled with  
 impressions from the world around it.  
 These impressions are the raw material  
 of thought. They are the seeds from  
 which the mind grows. The mind is  
 a garden, and the world is the soil.  
 The mind is a house, and the world is  
 the furniture. The mind is a machine,  
 and the world is the fuel. The mind is  
 a mirror, and the world is the reflection.  
 The mind is a window, and the world is  
 the view. The mind is a door, and the  
 world is the passage. The mind is a  
 bridge, and the world is the crossing.  
 The mind is a path, and the world is  
 the journey. The mind is a map, and  
 the world is the territory. The mind is  
 a compass, and the world is the direction.  
 The mind is a clock, and the world is  
 the time. The mind is a scale, and the  
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 balance, and the world is the equilibrium.  
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lands Extract Zi Mis for an ointment. With this ointment the part is to be anointed several times in the twenty four hours.

An ointment made of the *Dalura stramonium* is also highly recommended, the soft extract of cicuta, a mixture of laud and laudanum, or two or three grains of opium, may be introduced up the rectum, with advantage. *Agrosticum Nigrum* forms a good ointment by digesting the bruised leaves with olive oil, or fresh lard.

Balsam Copaiva given in the dose of from ʒss to ʒi three times a day, will sometimes very much relieve the pain arising from hemorrhoids. By the late Dr. Sæm the sp. *Leucosticta* in a dose of ten or fifteen drops, was very highly recommended for the same indication.

The inflammatory symptoms having subsided recourse is to be had to the stringents with the view of giving tone to the relaxed part, and to constrict the debilitated vessels.

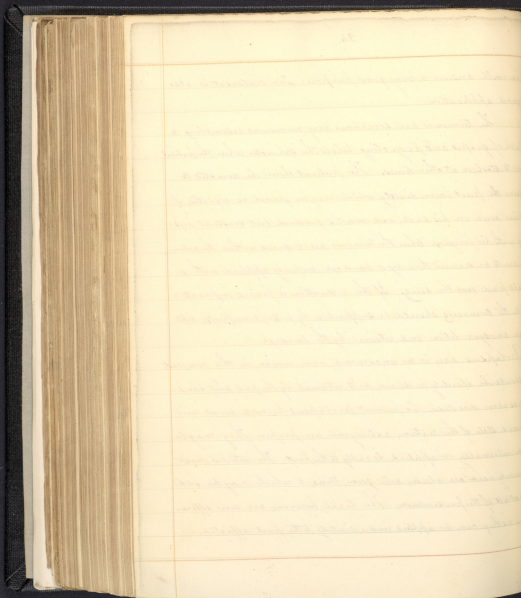
The following ointment as recommended by Dr. DeWees, appears well calculated to answer this indication. R Galls finely pulverised ʒi, Tinct of pin ʒss. Goulards Extract ʒss. Soft Lard ʒi. Comp. sp. Lav. ʒtss. Mix for ointment. The juice of the persimmon, infusion of galls, of oak bark, or a solution of alum, or sulphate of



zinc will answer a very good purpose. Tar ointment is also a good application.

The tumours are sometimes very numerous, resembling a bunch of grapes and projecting below the sphincter when the patient goes to stool, or at other times. The patient should be directed to reduce the part immediately, which may in general be effected, if he lies down on his back, and makes gradual but constant pressure with his fingers. When the tumours are reduced within the rectum, they are to be secured there by a bandage properly applied with a small pad over the anus. If the reduction is found impracticable the tumours should be supported by a soft compress, kept in an anodyne lotion and retained by the bandage.

Prolapsus ani, is no uncommon occurrence in this complaint. It should be speedily reduced, and retained by the pad and bandage as above directed. To prevent prolapsus from a weak and relaxed state of the rectum, astringents are proper. They may be given internally, or applied locally to the part. The internal most commonly used are alum, and gum kino, to which may be added the extract of the periwinkle. The local however, are more efficacious, as they can be applied immediately to the part affected.

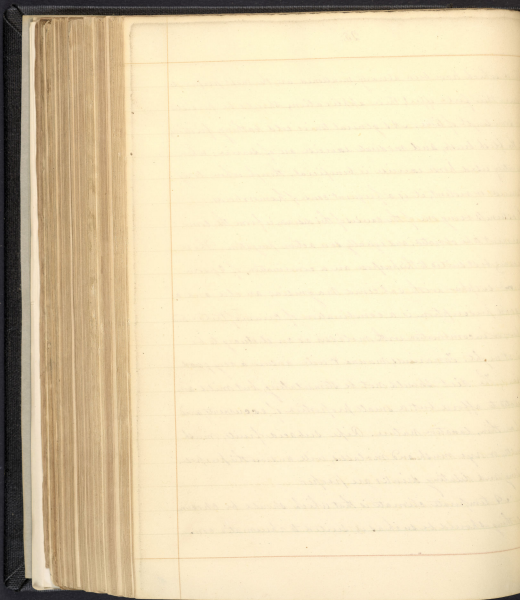


Those which have been already mentioned are the most proper, to produce their full effect, their applications should be persisted in for some length of time. As general tonics cold bathing, friction with the flesh brush, and moderate exercise are of service; when moderately used horse exercise is beneficial, though when long continued or violent, it is a frequent cause of hemorrhoids.

Costiveness being one of the causes of this disease, is from the commencement to be obviated, and equally so is active purgation. Those medicines best suited to this purpose are a combination of Epsom salts and sulphur with calcined Magnesia; an old and a very good prescription is a combination of Cream of tartar and Sulphur; or in combination with molasses as an electary to be taken at night. Tamarinds, Mauna & c. will answer a very good purpose. The diet should not be stimulating, but mild and calculated to afford but a small proportion of excitement, and that of a thin, laxative nature. Ripe subacid fruits, mush and milk, or rye mush and molasses, will answer this purpose.

Cooling and diluting drinks are proper.

A temperate climate is that which should be chosen, the clothing should be such as is suited to rheumatic com-



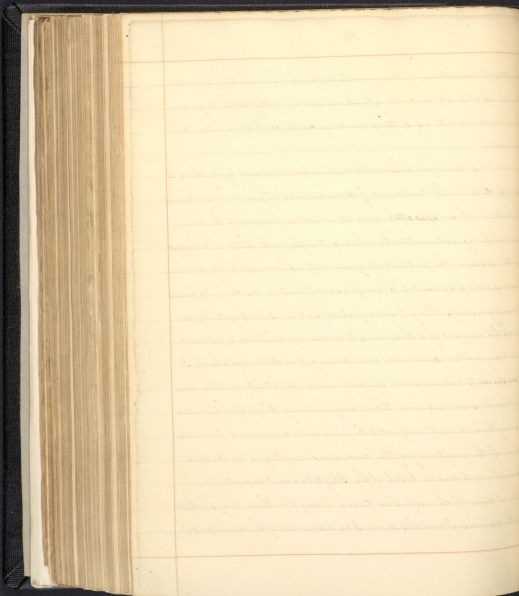


plaints; transition of temperature, and especially sudden impressions of heat, or cold, applied immediately to the region of the fundament, as sitting on very cold, or hot seats, is injurious.

I have now detailed the remedies mentioned by authors as most effectual in the treatment of Hemorrhoids. They are all, however, uncertain in their effects, and it is not unfrequently the case, that, after having exhausted the whole catalogue with little or no effect upon the disease, the patient is given up as incurable by medicine, and compelled to submit to a surgical operation as the only means of obtaining relief. My principal object in selecting Hemorrhoids as the subject of a thesis was, to recommend in its treatment a medicine not in common use among practitioners, which, I am inclined to believe more certain and effectual in the cure of this troublesome disease, than any remedy hitherto proposed.

Having been myself subject to the piles, and convinced from experience of the inefficacy of the medicines employed in its cure, I was induced to make trial of the *Phytolacca Decandria*.

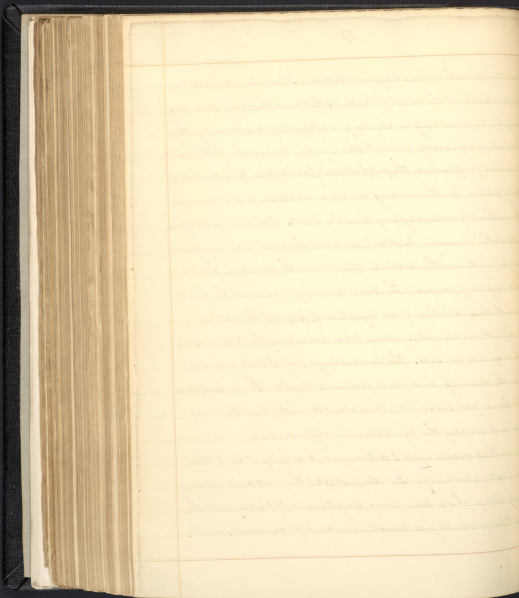
I took a dose of the infusion twice a day, for three days, which cured the disease. From this time I had no more of the complaint for



about two months when it again returned. There were several tumours situated on the verge of the anus that were throbbing and very painful, particularly in walking, or attempting to sit on anything hard, and especially when at stool. An infusion of the dried leaves was prepared, in the proportion of an ounce to a pound of boiling water. In the morning one ounce was taken, and at noon another, without producing any sensible effect. The dose was again repeated in the evening. In about an hour, the pain was very much relieved, with no other sensible effect from the medicine than a slight degree of nausea. The same quantity was used the next day, with the addition of an injection of ℥ij up the rectum.

The effect was an entire relief from pain, and the tumours very much reduced in size. The succeeding day I took only one dose in the morning, and an injection at night. The result was that I have not since (it is now about 18 months) had the least occasion to employ the medicine in my own case.

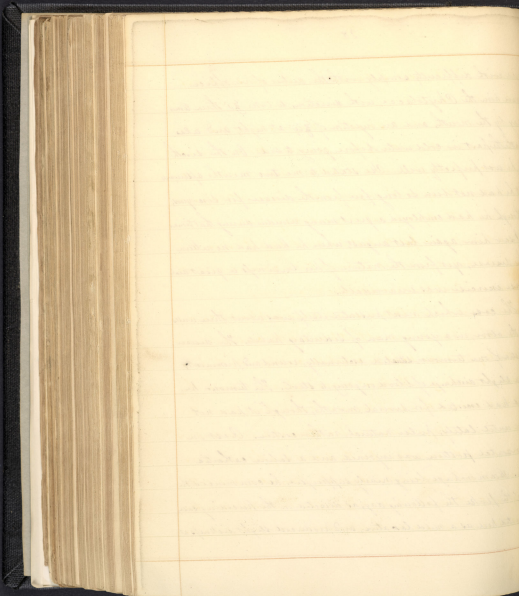
Thus encouraged I determined to employ it in others the earliest opportunity. In August 1821 the first case occurred. Sheriff M— had been for a long time afflicted with the Blind Piles, producing so much pain and inconvenience, he



could with difficulty comply with the duties of his office. I gave him the *Phytolacca*, with directions to take  $\mathfrak{z}i$  three times a day by the mouth, and an injection of  $\mathfrak{z}iij$  at night, and also to bathe the part in cold water before going to bed. On the sixth day he was perfectly well. He stated to me two months afterwards that he had not been so long free from the disease for five years, although he had employed a great many remedies during that time.

I saw him again last August, when he had had no return of the disease, yet from the nature of his business a great deal of horse exercise was unavoidable.

The case which next presented itself was about three weeks after the above, in a young man of sedentary habits. The disease consisted of one tumour situated externally, round and prominent, with a slight discharge of blood on going to stool. The tumour he stated had existed for several months, though it had not bled until lately; pulse natural, rather exertive. Rest in a horizontal position was enjoined, and a saline cathartic given. Haemorrhage being nearly suppressed, he commenced the use of the probe the following day, as directed in the preceding case, it operated here as a mild laceration, and produced slight discharges

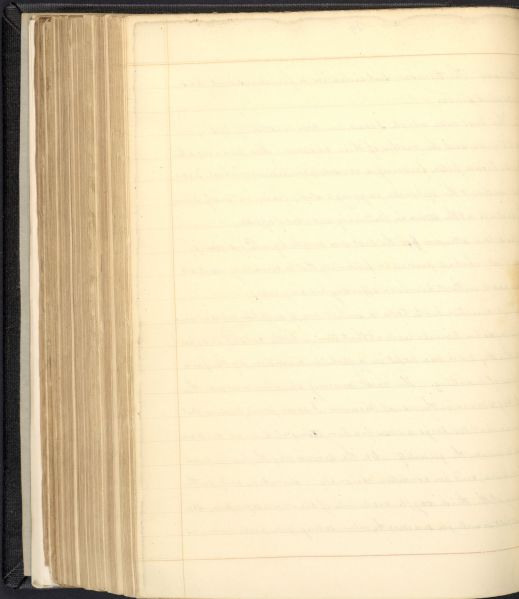


the stomach. The tumour subsided in a few days, and has not returned since.

The last case which I shall mention was that of Mrs L — aged 28 years, and the mother of three children. Her case was the internal blind piles, forming a considerable tumour, which projected without the sphincter on going to stool; pain intensely severe with sickness at the stomach, flatulency and want of appetite.

She had been attended for the last six months by a Physician of Williamstown, who had prescribed for her all that is commonly resorted to in these cases, without, however affording her any relief.

I first directed her to take a small dose of sulphur and calomel magnesia, as her bowels were at that time a little constipated; previous to this they had been kept in a soluble condition by the frequent use of laxating. The next morning she commenced the use of *Phytolacca* in the usual manner. I soon found, however, that an ounce was too large a dose for her stomach to bear, and was obliged to reduce the quantity. On the second day the pain was much relieved, and her condition obviously improved, and on the morning of the third day, to make use of her own expression, she had not felt so well for six months, or been so long free from pain, as





since yesterday: she continued improving rapidly, and at the expiration of eight days left off the use of the medicine being entirely well.

In several other cases the medicine has been employed with equal success. To my knowledge it has never failed, but in one instance, and in this, there was every reason to suppose the hemorrhoidal affection to be accompanied with an occult fistula; the patient being a young Lady, I was not permitted to satisfy myself by an examination, as to the truth of the conjecture.

It is worthy of remark, that the medicine when administered internally frequently relieved the pain &c without producing any evacuation, or other sensible operation upon the system. The injection however adds much to its efficacy and should always be administered. If the value of this remedy in the disease under consideration, I have not been able to find mention made, except in that invaluable work, the American Dispensary. To the indefatigable labour, and deep researches of its author, the science of medicine will ever remain justly indebted.

Should the disease, however, resist all our remedies, and the tumours remain, protruding at stool, producing inconvenience to

